

## **Application for Payment Schedule**

Informa	native English Translation. In case of any dispute, the Czech language version shall prevail.
Identification Data	
Name and Surname/Designation of the Payer	
Number of the Client/Identification Number	
Contact Address (if it differs from the address of the per	rmanent residency/registered office)
Street	Descriptive/Indicative Number
Municipality	Postal Code
Telephone Number Ema	ail
I hereby apply for an issuance of the payment so	chedule regarding (please mark with a cross)
An overall <b>insurance premium</b> due Another	r amount of the insurance premium due CZK
An overall <b>penalty</b> due Another	r amount of the penalty due CZK
I propose the monthly instalment in the amount of at the maximum)	CZK for the period of months (12 months
Addition of the Application:	
legal title as far as enabling issuance of the payments schedule a schedule. I further take note that a potential approval of the p	determine amounts of the instalments and terms of payments. There shall be no and the OZP shall not be obliged to finally decide if to issue such a payments payment schedule shall not interrupt the quantification of the penalty. The syment of the overall insurance premium due. In case that the payment schedule previous notification.

## The Information Related to the Processing of the Personal Data

The above stated personal data shall be processed by Oborová zdravotní pojišťovna zaměstnanců bank, pojišťoven a stavebnictví, with its registered office in Prague 4, Roškotova 1225/1, Postal Code 140 21, Identification Number: 471 14 321, entered into the Commercial Register kept by the Municipal Court of Prague, File Number A 7232, (hereinafter referred to as the "OZP"), namely, exclusively for the purposes of evidence, processing and settlement of this application. The personal data in the scope of telephone number and email address shall be used by the OZP merely in the course of an operational communication with you, as the client, in case of any lack of clarity and/or imperfection of your application.

 $Contact \ details concerning the \ data \ protection \ officer \ of the \ OZP \ shall \ be: address-Prague \ 4, Ro\"skotova \ 1225/1, Postal \ Code \ 140 \ 21, email \ address-dpo@ozp.cz.$ 

The above mentioned personal data shall be processed based on the legitimate interest of the OZP concerning the duly and timely settlement of your application in sense of Article 6(1), lit. f), of Regulation of the European Parliament and of the Council (EU) 2016/679, on the Protection of Natural Persons with regard to the Processing of Personal Data and on the Free Movement of Such Data, And Repealing Directive 95/46/EC (General Data Protection Regulation), (hereinafter referred to as the "Regulation"). The personal data shall be stored by the OZP for the period of duration of the insurance relationship of you, as the client, and the OZP and, further, for the period that would be necessary. Providing of the personal data shall be necessary in order to duly and timely settlement of your application under Article 13(2), lit. e), of the Regulation. In case you did not grant the personal data, it shall be impossible to settle you application swiftly and duly.

## You shall have the right

- to request an access to the personal data and to require the information in accordance with provisions of Article 15 of the Regulation,
- to the rectification of the personal data in sense of Article 16 of the Regulation or, as the case may be,
- to the restriction of the processing under Article 18 of the Regulation,
- to data portability under Article 20 of the Regulation,
- to lodge a complaint with the supervisory authority namely, with the Office for Protection of the Personal Data (in Czech: Úřad pro ochranu osobních údajů).
- Without undue delay, OZP shall be obliged to rectify inaccurate personal data, as well as to have incomplete personal data be completed (In this connection you shall be obliged to provide OZP with a necessary cooperation especially, to notify OZP of any change regarding your personal data).

## Further, you shall have the right

- to object the processing in accordance with Article 21 of the Regulation.

If it was likely that a certain case of a breach concerning security of the personal data was to result in the high risk towards rights and freedoms of natural persons, OZP shall be obliged to inform you, as the personal data subject, without undue delay.

I hereby declare all the data included in this application are true, accurate and comple	ete.
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Date	Sig	gnature